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## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.	24462.2	
First Inventor	GERALD D. FULLER	0.6
Title	SUPPLEMENTAL CAPACITIVE	S. 7
Express Mail Label No.	EV301293122US	ے ک

(Only for new nonprovisional applications under 37 CFR 1.33(b))	Express Mail Label No.
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:  Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
1.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of (when there is an assignee)  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment  14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  Other:
specification following the title, or in an Application Data Sheet und	
Disconstitution information Evaminer	Art Unit:  Art Unit:  f the prior application, from which an oath or declaration is supplied under Box tion or divisional application and is hereby incorporated by reference.
	ONDENCE ADDRESS
Customer Number: 000716	OR Correspondence address below
Name Pamela B. Huff	
Address 112 E. PECAN ST., SUITE 1800	
City San Antonio	State Texas Zip Code 78205-1521
Country USA	Telephone 210-554-5450 Fax 210-226-8395
Name (Print/Type)   Pamera B. Huff	Registration No. (Attorney/Agent)   35,901
Signature Pamile D. Shipf	Date March 17, 2004

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** 

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Application Number	
Filing Date	
First Named Inventor	Gerald D. Fuller
Examiner Name	
Art Unit	
Attorney Docket No.	24462.2

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	3. ADDITIONAL FEES			
Deposit Account:	rge Entity   Small Entity			
Deposit Account.	ee Fee Fee Fee Fee Des ode (\$) Code (\$)	scription <u>Fee Paid</u>		
Account 03-3483	051 130 2051 65 Surcharge - late filir	r		
Deposit Account Cox & Smith Incorporated	052 50 2052 25 Surcharge - late pro	• —		
Name	053 130 1053 130 Non-English specific	cation		
The Director is authorized to: (check all that apply)  Charge fee(s) indicated below  X  Credit any overpayments	812 2,520 1812 2,520 For filing a request	for ex parte reexamination		
X Charge any additional fee(s) or any underpayment of fee(s)	804 920* 1804 920* Requesting publicat	ion of SIR prior to		
Charge fee(s) indicated below, except for the filing fee	Examiner action 805 1,840* 1805 1,840* Requesting publica	tion of SIP after		
to the above-identified deposit account.	Examiner action	tion of silvaner		
FEE CALCULATION	251 110 2251 55 Extension for reply	within first month		
1. BASIC FILING FEE	252 420 2252 210 Extension for reply	within second month		
Large Entity Small Entity	253 950 2253 475 Extension for reply	within third month		
Fee Fee Fee Fee Pee Paid Code (\$) Code (\$)	254 1,480 2254 740 Extension for reply	within fourth month		
1001 770 2001 385 Utility filing fee 385	255 2,010 2255 1,005 Extension for reply	within fifth month		
1002 340 2002 170 Design filing fee	401 330 2401 165 Notice of Appeal			
1003 530 2003 265 Plant filing fee	402 330 2402 165 Filing a brief in sup			
1004 770 2004 385 Reissue filing fee	403 290 2403 145 Request for oral he	aring		
1005 160 2005 80 Provisional filing fee	451 1,510 1451 1,510 Petition to institute			
SUBTOTAL (1) (\$) 385	452 110 2452 55 Petition to revive - 0	unavoidable		
	453 1,330 2453 665 Petition to revive -	unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	501 1,330 2501 665 Utility issue fee (or	reissue)		
Total Claims 20 -20* = 0 x 0 = 0	502 480 2502 240 Design issue fee			
Independent 3 or 0 v 0	503 640 2503 320 Plant issue fee			
Claims  Multiple Dependent  3 - 3** = 0 X 0 = 0	460 130 1460 130 Petitions to the Co	mmissioner		
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Large Entity   Small Entity Fee Fee Fee Fee Fee Description		rmation Disclosure Stmt		
Code (\$) Code (\$)	021 40 8021 40 Recording each pa	tent assignment per		
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	809 770 2809 385 Filing a submission (37 CFR 1.129(a))	after final rejection		
1203 290 2203 145 Multiple dependent claim, if not paid	810 770 2810 385 For each additiona	l invention to be		
1204 86 2204 43 ** Reissue independent claims over original patent	examined (37 CFR 1801 770 2801 385 Request for Contin	nued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expect of a design applica			
	Other fee (specify)			
**or number previously paid, if greater; For Reissues, see above	Reduced by Basic Filing Fee Paid SUE	STOTAL (3) (\$)		

SUBMITTED BY	I am		(Comple	te (if applicable))
lame (Print/Type)	Pamela B. Huff	Registration No. 35,901	Telephoi	<sup>1</sup> e210−554−5450
ignature	Jamela D. Huff		Date	3/17/04

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## Cox & Smith

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112 East Pecan Street Suite 1800 San Antonio, Texas 78205-1521 (210) 554-5500 Fax (210) 226-8395 www.coxsmith.com

Writer's Direct Number (210) 554-5450

Writer's E-Mail Address pbhuff@coxsmith.com

March 17, 2004

Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

> Re: United States Patent Application Entitled: SUPPLEMENTAL CAPACITIVE **DISCHARGE IGNITION SYSTEM**; Inventor: Gerald D. Fuller Our Ref. No.: 24462.2

Dear Sir or Madam:

Enclosed for filing are the following documents:

- 1. Utility Patent Application Transmittal Sheet (PTO/SB/05);
- Fee Transmittal Sheet (FY 2004); 2.
- United States Utility Patent Application (Specification, Claims, Abstract) (21 3. pages);
- 4. Drawings (7 sheets);
- Inventors' Declaration and Power of Attorney (2 pages); 5.
- 6. Information Disclosure Statement (PTO/SB/08A) (1 page);
- Check in the amount of \$385; and 7.
- Acknowledgment Post Card. 8.

Respectfully submitted,

Pamela B. Huff Reg. No. 35,901

klb/Enclosures

Mr. Gerald D. Fuller

EXPRESS MAIL "Post Office to Addressee"

Mailing Label No.: EV 301293122 US Date of Deposit:

March 17, 2004